

State of Washington Application for a Water Right



For	Ecology Use
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Please follow the attached instructions to avoid unnecessary delays.

Section 1. APPLICANT - PERSON, ORGA	NIZATION, OR WATER SYSTEM
Name Lamb-Weston, Inc.	Home Tel: (
Mailing Address P.O. Box 1900	Work Tel: (509)735 ~ 4651
City Tri-Cities, State WA Zip+499302	+ <u>1900</u> FAX: (<u>509</u>) 736 - <u>0322</u>
Section 2. CONTACT - PERSON TO CALL Same as above	ABOUT THE APPLICATION
Name Tim Stapleton	Home Tel: ()
Mailing Address 2013 Saint Street	Work Tel: (509) 375 - 4181
City Richland State WA Zip+4 9935	
Relationship to applicant Plant Engineering Man	nager
Section 3. STATEMENT OF INTENT The applicant requests a permit to use not more than □ cubic feet per second) from a □ surface water source or □	
of	ATTACH A "LEGAL"
DESCRIPTION OF THE PLACE OF USE. (See instructi sufficient.	ons.) NOTE: A tax parcel number or a plat number is not
Estimate a maximum annual quantity to be used in acre-foot	per year:920
☐ Check if the water use is proposed for a short-term pro	ject. Indicate the period of time that the water will be needed:
From/ to/	jour maloute and period of time time time time time.
Section 4. WATTER SOURCE	
If SURFACE WATER	If GROUNDWATER
Name the water source and indicate if stream, spring, lake, etc. If unnamed, write "unnamed spring," "unnamed stream," etc.:	A permit is desired for well(s). 1- Existing (e) 1- Proposed (p)
Number of diversions	1- Floposed (p)
Number of diversions:	
Source flows into (name of body of water):	Size & depth of well(s): 16" diameter x65' deep (existing) 16" diameter x approx. 100' deep
LOCATION	
Enter the north-south and east-west distances in feet frosection corner:	om the point of diversion or withdrawal to the nearest
1/4 of Section Township Range (E/W) County If location of source is platted, complete below: Lot Block Subdivision
575 Feet North and 75 Feet West from	the Center of Section 34, Benton Co. (e)
235 Feet South and 859 Feet East from	the Center of SW Section 33, Benton Co.
For Ecology Use Date Received: Priori	y Datei
SEPA: Exempt/Not Exempt FERC License #	Dept. Of Health #
Date Accepted As Complete By D	ate Returned By WRIA: 40
	BEATION

ECY 040-1-14 Rev. 7/97 * * f **APPLICATION**

Appl. No.: 64-34532

Se	ction 5. GENERAL WATER SYSTEM INFORMATION
A.	Name of system, if named:n/a
В.	Briefly describe your proposed water system. (See instructions.) Install new well near treatment plant and discharge the well water into existing pump pit that is used to pump water to each spray field.
C.	Do you already have any water rights or claims associated with this property or system? ✓ YES □ NO
C.	PROVIDE DOCUMENTATION. See attached Certificate of Water Right
200001111100	ection 6. DOMESTIC/PUBLIC WATER SUPPLY SYSTEM INFORMATION Completed for all domestic/public supply uses.)
A.	Number of "connections" requested: Type of connection (Homes, Apartment, Recreational, etc.)
В.	Are you within the area of an approved water system? If yes, explain why you are unable to connect to the system. Note: Regional water systems are identified by your County Health Department.
Co	mplete C. and D. only if the proposed water system will have fifteen or more connections.
C.	Do you have a current water system plan approved by the Washington State Department of Health? If yes, when was it approved? Please attach the current approved version of your plan.
D.	Do you have an approved conservation plan? If yes, when was it approved? Please attach the current approved version of your plan.
CC000000000000000000000000000000000000	ection 7. IRRIGATION/AGRICULTURAL/FARM INFORMATION Completed for all irrigation and agriculture uses.) Total number of acres to be irrigated:
B.	List total number of acres for other specified agricultural uses:
	Use Acres
	Use Acres Use Acres
C.	Total number of acres to be covered by this application:
D.	Family Farm Act (Initiative Measure Number 59, November 3, 1977) Add up the acreage in which you have a controlling interest, including only: ‡ Acreage irrigated under water rights acquired after December 8, 1977; ‡ Acreage proposed to be irrigated under this application; ‡ Acreage proposed to be irrigated under other pending application(s).
	 Is the combined acreage greater than 2000 acres? Do you have a controlling interest in a Family Farm Development Permit? If yes, enter permit no.:
E.	Farm uses: Stockwater - Total # of animals Animal Type (If dairy cattle, see below) Dairy - # Milking # Non-milking

Section 8. WATER STORAGE

Will you be using a dam, dike, or other structure to retain or store water?

☐ YES ☑ NO

NOTE: If you will be storing 10 acre-feet or more of water and/or if the water depth will be 10 feet or more at the deepest point, and some portion of the storage will be above grade, you must also apply for a reservoir permit. You can get a reservoir permit application from the Department of Ecology.

Section 9. DRIVING DIRECTIONS

Provide detailed driving instructions to the project site. Leaving the City of Richland, heading north on Stevens prive, turn left onto Coast Street towards Highway 240. At the stop light proceed throught the light, wich will place you on Highway 240. Cross railroad tracks and approximately 100 yards after the track, turn lefton Hagan Road. There is a "T" intersection at the plant site—take a right onto Saint Street and proceed past the processing plant to the end of Saint Street. The new well will be approximately 150 yards due north.

Section 10. REQUIRED MAP

A. Attach a map of the project. (See instructions.)

Attached.

(ection 1	1 DD/	MODED	V. VALVE F	DOUBLE
	ECTION 1				TITICAL

Landowner for place of use (if same as applicant, write "same")

	G10/13/14, 14 (KO) B DATE 1 (O) (B B T) DATE 1 (O)			
A.	Does the applicant own the land on which the water will be used? If no, explain the applicant's interest in the place of use and provide of the owner(s):		₹ YES	□NO
В.	Does the applicant own the land on which the water source is local If no, submit a copy of agreement:	ated?	□¥YES	□NC
to pi mon	tify that the information above is true and accurate to the best of cocess my application, I grant staff from the Department of Ecoloitoring purposes. Even though I may have been assisted in the properties of the Department of Ecology, all responsibility for the accuracy.	ogy access to the site for insp reparation of the above appli	ection an cation by	d the
X	Mulhammel	October 3, 2001		
	icant (or authorized representative) ve R. Rummel, Senior Vice President	Date		
	n/a			

Date

Use this page to continue your answers to any questions on the application. Please indicate section number before answer.

Location.						
The existing	well is located on	Parcel No.	1 340	8 200	0013	000.
The brobosed	well is located on	Parcel No.	1 330	8 100	0001	001
The place of	use is located on	Parcel Nos.	1 280	300	0000	000 and
			1. 330	3 100	0001	001.

ason(s):	
	APPLICANT PLEASE RETURN TO CASHIER, PO BOX 5128, LACEY, WA 98509-5128
is/are	APPLICANT PLEASE RETURN TO THE APPROPRIATE REGIONAL OFFICE
bove and return you	r application by
	is/are

Date

Ecology is an Equal Opportunity and Affirmative Action employer.

Ecology staff

To receive this document in alternative format, contact the Water Resources Program at (360) 407-6604 (Voice) or (360) 407-6006 (TDD).

